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**\*BIBDATASHEET\***

CONFIRMATION NO. 1701

Bib Data Sheet

|                             |                                       |              |                        |                                       |
|-----------------------------|---------------------------------------|--------------|------------------------|---------------------------------------|
| SERIAL NUMBER<br>10/822,254 | FILING DATE<br>04/09/2004<br><br>RULE | CLASS<br>435 | GROUP ART UNIT<br>1653 | ATTORNEY<br>DOCKET NO.<br>JB06017US01 |
|-----------------------------|---------------------------------------|--------------|------------------------|---------------------------------------|

## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/461,787 04/10/2003 *AR*  
 and claims benefit of 60/547,265 02/24/2004

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 06/23/2004

|   |                       |         |        |             |
|---|-----------------------|---------|--------|-------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | STATE OR              | SHEETS  | TOTAL  | INDEPENDENT |
| 35 USC 119 (a-d) conditions<br>met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after | COUNTRY               | DRAWING | CLAIMS | CLAIMS      |
| Verified and<br>Acknowledged  | NJ                    | 0       | 57     | 5           |
| Allowance<br><i>Agnes Rooke</i><br>Examiner's Signature   | <i>AR</i><br>Initials |         |        |             |

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## TITLE

Soluble, stable form of HDM2, crystalline forms thereof and methods of use thereof

|  |   |   |                                   |   |  |  |                                      |                                 |
|--|---|---|-----------------------------------|---|--|--|--------------------------------------|---------------------------------|
| FILING FEE<br><br>RECEIVED<br>2118                             | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <table border="1"><tr><td><input type="checkbox"/> All Fees</td></tr><tr><td><input type="checkbox"/> 1.16 Fees ( Filing )</td></tr><tr><td><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )</td></tr><tr><td><input type="checkbox"/> 1.18 Fees ( Issue )</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table> | <input type="checkbox"/> All Fees | <input type="checkbox"/> 1.16 Fees ( Filing ) | <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) | <input type="checkbox"/> 1.18 Fees ( Issue ) | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Credit |
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